

## **HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470

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STATE OF HAWAII STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

(First)	(Middle)	TELEPHONE	
JOHN	н.	808/531-4551	
		FAX	
222 SOUTH VINEYARD STREET, SUITE 401			
(State)	(Zip (	(Zip Code)	
HAWAII	96813-2	96813-2453	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			
		808/531-4551	
		FAX	
401		808/533-4601	
(State)	Zip (	(Zip Code)	
HAWAII	96813	96813-2453	
	JOHN  (State)  HAWAII  ou are employed by a business of the state of t	JOHN H.  401  (State) (Zip of HAWAII 96813-2)  but are employed by a business entity which has been retained to lobby)  401  (State) (Zip of HAWAII (State))	

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PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE 202-775-0101	
RECORDING INDUSTRY ASSOC			
MAILING ADDRESS (Street)		FAX 202-775-7253	
1330 CONNECTICUT AVENUE, N			
(City)	(State)	(Zip Code)	
WASHINGTON	DC	20036	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE 808-531-4551	
MELODY BUTAY DACANAY			
MAILING ADDRESS (Street)		FAX 808-533-4601	
222 SOUTH VINEYARD STREET	, SUITE 401		

FILLEWED BY U.S. PARE.

(City)	(State)	(Zip Code)			
HONOLULU	HI	96813-2453			
PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY					
[ ] Agriculture	[ ] Education	[ ] Human Services	[ ] Science, Technology & Economic Development		
[ ] Communications & Public Utilities	[ ] Government Operations & Finance	[ ] Intergovernmental Relations, International Affairs	[ ] Tourism & Recreation		
[ ] Consumer Protection & Commerce	[ ] Hawaiian Affairs	[ ] Labor & Employment	[ ] Transportation		
[X] Culture, Arts, Historic Preservation	[ ] Health	[ ] Planning, Land & Water Use Management	[ ] Other: (indicate below)		
[ ] Ecology, Energy Environmental Protection	[] Housing	[ ] Public Safety & Corrections			
	N OF LOBBYIST				
I hereby certify that the information jurnished above is, to the best of my knowledge, correct and complete.					
	(Signature of Lot byist)		(Date)		
NAME Comberly A (Iman TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED					
MITCH-GLAZIER SENIOR VICE PRESIDENT, GOVERNMENT & INDUSTRY RELATIONS & TEGISLATIVE COUNSEL					
NAME OF ORGANIZATION (if app	Dilicable)		ELEPHONE 202-775-0101		
RECORDING INDUSTRY ASSOC MAILING ADDRESS (Street)	IATION		AX 202-775-7253		
1101 VERMONT AVENUE, NW SI	UITE 700		AX 202-115-1253		
(City)	// (State) (Zip Code)				
WASHINGTON	DC	20005			
Intereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.					

(Signature of Authorizing Officer or Person Represented)